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P.O. Box 2938

Minneapolis, MN 55402

Telephone (612) 373-6900

Facsimile (612) 339-3061

June 26, 2006

Commissioner for Patents TO:

Attn: Betty J. Forman

Patent Examining Corps

Facsimile Center P.O. Box 1450

Alexandria, VA 22313-1450

FROM: Timothy B. Clise

OUR REF: 235.022US1

TELEPHONE: 571-272-0741

FAX NUMBER (571) 273-8300

* Please deliver to Examiner Betty J. Forman in Art Unit 1634. *

Document(s) Transmitted: Request for Withdrawal as Attorney or Agent (1 pg.).

Total pages of this transmission, including cover letter: 2 pgs. If you do NOT receive all of the pages described above, please telephone us at 612-373-6900 or fax us at 612-339-3061.

In re. Patent Application of: Ralf Ehricht et al.

Examiner: Betty J. Forman

Serial No.: 10/038,284

Group Art Unit: 1634

Filed: January 2, 2002

Docket No.: 235.022US1

Title: MICROCHIP MATRIX DEVICE FOR DUPLICATING AND CHARACTERIZING

NUCLEIC ACIDS

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF **CORRESPONDENCE ADDRESS**

| Application Number | 10/038,284 |
|------------------------|-----------------|
| Filing Date | Jan 2, 2002 |
| First Named Inventor | Ratf Ehricht |
| Art Unit | 1634 |
| Examiner Name | Betty J. Forman |
| Attorney Oncket Number | 235,022US1 |

| To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | | | | | | |
|--|-----------------------------|----------|-------------------------|------------------------------|-------|---------------|-----|------------|--|
| Please withdraw me as attorney or agent for the above identified patent application, and | | | | | | | | | |
| ✓ all the attomeys/agents of record. | | | | | | | | | |
| the attorneys/agents (with registration numbers) listed on the attached paper(s), or | | | | | | | | | |
| the attorneys/agents associated with Customer Number | | | | 2118 | | | | | |
| NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number. | | | | | | | | | |
| The reasons for this request are: | | | | | | | | | |
| The assignee/client has requested that the file be transferred to another attorney for future prosecution. We wish to withdraw from representation consistent with the assignee's/client request. | | | | | | | | | |
| CORRESPONDENCE ADDRESS | | | | | | | | | |
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| 2. Change the correspondence address and direct all future correspondence to: | | | | | | | | | |
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| OR | | | | | | | | | |
| Firm or Individual Name | Steptoe & Johnson LLP | | | | | | | | |
| Address | 1330 Connecticut Avenue, NW | | | | | | | | |
| City | Washington | State DC | | | | | Zip | 20036-1795 | |
| Country | USA | | | | | | | | |
| Telephone (202) 429-3000 | | | | Email | hfox@ | x@steptoe.com | | | |
| Signature | 201 | | | | | | | | |
| Name Timothy B. Clise | | | Registration No. 40,957 | | | | | | |
| Date 20 Time '06 | | | | Telephone No. (612) 373-6900 | | | | | |
| NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved. | | | | | | | | | |

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioners for Patents P.O. Box 1450, Alexandria, VA 22313-1450. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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